EXHIBIT A

Berkley Insurance Company

A Stock Insurance Company

Lawyers Professional Liability Insurance

Policy Jacket

This Policy consists of:

- Declarations Page
- Policy Form
- Endorsements

In Witness Whereof, we have caused this policy to be executed and attested, and, if required by state law, this policy shall not be valid unless countersigned by our authorized representative.

President

Service Office

Berkley Select, on behalf of Berkley Insurance Company 550 W. Jackson Boulevard, Suite 500 Chicago, IL 60661

Toll Free: (844) 465-6256 Fax: (312) 207-1933

Email: newclaim@berkleyselect.com

A BERKLEY COMPANY®

Secretary

Administrative Office

Berkley Insurance Company

475 Steamboat Road, Greenwich CT 06830 Case 3:24-cv-00256-DWD Document 1-1 Filed 02/02/24 Page 3 of 24 Page ID

BERKLEY INSURANCE COMPANY

A Stock Insurance Company

Declarations Page

475 Steamboat Road, Greenwich, CT 06830

Lawyers Professional Liability Insurance

NOTICE: THIS POLICY PROVIDES COVERAGE ON A CLAIMS MADE AND REPORTED BASIS SUBJECT TO ITS TERMS. THIS POLICY APPLIES ONLY TO ANY CLAIM FIRST MADE AGAINST THE INSUREDS AND REPORTED TO THE INSURER DURING THE POLICY PERIOD OR ANY EXTENDED REPORTING PERIOD THAT MAY APPLY.

PLEASE READ AND REVIEW THE POLICY CAREFULLY AND DISCUSS THE COVERAGE WITH YOUR INSURANCE AGENT OR BROKER.

IF INDICATED IN ITEM 5. A. BELOW, THE LIMIT OF LIABILITY AVAILABLE TO PAY DAMAGES OR SETTLEMENTS SHALL BE REDUCED AND MAY BE COMPLETELY EXHAUSTED BY AMOUNTS INCURRED AS LEGAL DEFENSE COSTS. THE INSURER SHALL NOT BE LIABLE FOR LEGAL DEFENSE COSTS OR FOR THE AMOUNT OF ANY JUDGMENT OR SETTLEMENT AFTER EXHAUSTION OF THE LIMIT OF LIABILITY.

Whenever printed in this Declarations Page, the boldface type terms shall have the same meanings as indicated in the Policy.

Item 1.	Name and Add	lress o	f Named In	sured:	Policy Number: PLP-1499184-P7					
	Caraway & Broombaugh, P.C.									
	9423 West Mair	9423 West Main Street								
	Belleville, IL 62	223								
Item 2.	Policy Period:	Fre	om June 1, 2	2022 (inception date) to June	e 1, 2023 (expiration date)					
		(Bo	oth dates at	12:01 a.m. Standard Time at	the address of the Named Insured)					
Item 3.	Limits of Liabil	lity for	the Policy	Period:						
		A.	\$2,000,0	00 each Claim, but in no eve	nt exceeding					
		B.	\$2,000,0	00 in the aggregate for all CI	aims					
ltem 4.	Supplemental (Covera	ıges Limit d	of Liability:						
			\$100,000	in the aggregate for all Su	oplemental Coverages during the Policy Period					
Item 5.	Claim Expense	s for th	ne Policy Pe	eriod:						
		€ A.	Claim Ex	penses Reduce the Limit of	Liability in Item 3. above					
		□ в.	Claim Ex	rpenses in Addition to the Li	nit of Liability in Item 3. above					
Item 6.	Deductible:									
		J А.	Aggregat	e Deductible - All Claims	N/A					
	Σ	€ B.	Each Cla	im Deductible	\$5,000					
			🗷 i. T	he Deductible applies to Da	mages and Claim Expenses					
			☐ ii. T	he Deductible applies only to	Damages					
ltem 7.	Premium:									

LPL 39451 (rev. 09-18) Producer: Kristin T, Wagnon Page 1 of 2

Item 8.

Form	ns and Endorsemei	nts attached at i	inception: LPL 39450 (10-14)
1	701-CR-	0419	CLAIM REPORTING PROCEDURES
2	IL-PHN-	1019	ILLINOIS POLICY HOLDER NOTICE
3	LPL 101101-CW	(rev. 04-17)	Amend Insuring Agreement to Remove Career Coverage
4	LPL 101901	(05-14)	Addition of Prior Acts Date
5	LPL 400901-CW	(10-14)	Office Sharing Exclusion
6	LPL 400906-CW	(10-14)	Specific Claim or Incident Exclusion
7	LPL-IL-PAE	(10-14)	Illinois Policy Amendatory Endorsement

These Declarations along with the completed and signed Application and the Lawyers Professional Liability Insurance Policy shall constitute the contract between the **Named Insured** and the **Insurer**.

Authorized Representative:



Date Issued: June 2, 2022

BERKLEY SELECT

CLAIM REPORTING PROCEDURES

In the event of an incident which may result in a claim, an actual claim or your receipt of suit papers, please follow the procedures outlined below:

NOTICE OF EACH INCIDENT, CLAIM OR SUIT SHOULD IMMEDIATELY BE REPORTED TO:

BERKLEY SELECT CLAIMS DEPARTMENT on behalf of Berkley Insurance Company 550 W. Jackson Blvd., Suite 500 Chicago, IL 60661 Fax: (312) 207-1933

E-mail: newclaim@berkleyselect.com
Online: www.berkleyselect.com/claims/report-claim

TO ENABLE US TO RESPOND MORE QUICKLY AND EFFICIENTLY, please fax or email any pertinent details of the claim directly to our attention.

PLEASE BE SURE TO INCLUDE:

- Your Name, Address and Phone Number;
- Your Policy Number and the Policy Period;
- A written narrative of the circumstances surrounding the claim or potential claim;
- Names and addresses of the claimant;
- Details of the any underlying claim, including current status and the amount in controversy or relief demanded.
- If you are submitting the report by mail or fax, please also include any letters
 of demand or any legal papers which you have received regarding the claim.

Please provide your professional liability insurance agent a copy of all claim notices and correspondence sent to Berkley Select.

Insured	Policy Number	er
Caraway & Broombaugh, P.C.	PLP-1499184	1-P7
Effective Date of This Endorsement 06/01/2022	Authorized Representative	

Illinois IMPORTANT POLICYHOLDER NOTICE

The Illinois Department of Insurance has enacted a rule where no policy may be delivered in the State unless the policyholder(s) are provided written notice of the address of the insurance Company complaint department and the address of the Public Service Division of the Illinois Department of Insurance.

Should any complaints arise regarding this insurance, you may contact the following:

BERKLEY SELECT on behalf of Berkley Insurance Company 550 W. Jackson Blvd., Suite 500 Chicago, IL 60661 (844)-465-6256

If you wish to take the matter up with the Illinois Department of Insurance, complaints may be submitted in the following ways:

By mail to the Consumer Division in Springfield or Chicago:

Illinois Department of Insurance
Consumer Division of Public Services Section
320 West Washington Street
Springfield, Illinois 62767

Illinois Department of Insurance Consumer Division of Public Services Section 122 South Michigan Avenue, 19th Floor Chicago, Illinois 60603 FAX: (217) 558-2083

> On-line at: http://insurance.illinois.gov/

To submit an online complaint or reach the complaint forms to print off and mail/fax to the Illinois Department of Insurance:

https://mc.insurance.illinois.gov/messagecenter.nsf (online form)
https://insurance.illinois.gov/Complaints/PropertyCasualtyComplaintForm.pdf (printable format)

Insured Caraway & Broombaugh, P.C.	Policy Number PLP-1499184-P7
Effective Date of This Endorsement 06/01/2022	Authorized Representative

Amend Insuring Agreement to Remove Career Coverage

In consideration of the premium paid for this Policy, it is understood and agreed that:

- Section I. Insuring Agreement A. Lawyers Professional Liability Insurance Coverage of this Policy is deleted in its entirety and replaced with the following:
 - I. A. Lawyers Professional Liability Insurance Coverage

The Insurer agrees to pay on behalf of the Insured all sums in excess of the deductible, up to the Limit of Liability, that the Insured shall become legally obligated to pay as Damages and Claim Expenses because of a Claim that is both first made against the Insured and reported in writing to the Insurer during the Policy Period, or any Extended Reporting Period, if applicable, by reason of an act or omission in the performance of Legal Services by the Insured or by any person for whom the Insured is legally liable, while acting on behalf of the Named Insured and/or Predecessor Firm for clients of the Named Insured and/or Predecessor Firm provided that:

- 1. no Insured gave notice to a Prior Insurer of such Claim or a Related Claim; and/or
- 2. no Insured gave notice to a Prior Insurer of any such act or omission or Related Act or Omission; and/or
- prior to the inception date of the first policy if continuously renewed, or the date the Insured first became a 3. member or employee of the Named Insured and/or Predecessor Firm, whichever is later, no Insured had a basis to believe that any such act or omission, or Related Act or Omission, might reasonably be expected to be the basis of such Claim.

Insured Caraway & Broombaugh, P.C.	Policy Number PLP-1499184-P7
Effective Date of This Endorsement 06/01/2022	Authorized Representative

Addition of Prior Acts Date

In consideration of the premium paid for this Policy, it is understood and agreed that:

- 1. Section I. Insuring Agreement A. Lawyers Professional Liability Insurance Coverage of this Policy is amended by the addition of the following:
 - I. A. Lawyers Professional Liability Insurance Coverage
 - 4. the act or omission occurred on or after June 1, 2002.

Insured	Policy Number
Caraway & Broombaugh, P.C.	PLP-1499184-P7
Effective Date of This Endorsement 06/01/2022	Authorized Representative

Berkley Insurance Company

Office Sharing Exclusion

In consideration of the premium paid for this Policy, it is understood and agreed that:

- 1. Section IV. Exclusions of this Policy is amended by the addition of the following:
 - This Policy does not provide coverage for any Claim made against any Insured based on, or arising out of, or in any way involving an act or omission of any person who is not an Insured under this Policy, but with whom an Insured shares common office space.

Whenever printed in this Endorsement, the boldface type terms shall have the same meanings as indicated in the Policy Form. All other provisions of the Policy remain unchanged.

Insured		Policy Number
Caraway & Broombaugh, P.C.		PLP-1499184-P7
Effective Date of This Endorsement 06/01/2022	Authorized Repre	sentative

Policy Form: LPL 39450 (10-14)

Specific Claim or Incident Exclusion

Ir	n consideration	of the	premium	paid fo	or this	Policy,	it is	understood	and	agreed	that:
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- 1. Section IV. Exclusions of this Policy is amended by the addition of the following:
 - IV. This Policy does not apply to any Claims based on, arising from, or in any way involving any of the following matters:

 Description of Excluded Claims and or Incident

Barbara Boda

Insured	Policy Number
Caraway & Broombaugh, P.C.	PLP-1499184-P7
Effective Date of This Endorsement	Authorized Representative
06/01/2022	·

Illinois Policy Amendatory Endorsement

In consideration of the premium paid for this Policy, it is understood and agreed that:

- 1. Claim Expenses, as defined in and used throughout this Policy, shall not include any coverage for routine or ongoing expenses such as salaries for the Insurer's or the Insured's staff attorneys.
- 2. Section III. Definitions C. Claim Expenses sub-paragraph 4. of this Policy is deleted in its entirety.
- Damages, as defined in and used throughout this Policy, shall not include any coverage for pre-judgment interest. Pre-judgment interest is hereby deleted from the definition of Damages in the Policy and any endorsements that may apply.4.
 Section III. Definitions D. Damages of this Policy is amended by addition of the following:
 - III. D. It is further agreed that, except for punitive, exemplary or multiple damages, imposed on an **Insured** due to the **Insured's** vicarious liability, this Policy shall not provide coverage for punitive, exemplary or multiple damages awarded by a court of competent jurisdiction when applying the substantive law of the State of Illinois.
- 4. Section III. Definitions F. Insured sub-paragraph 6. of this Policy is amended by the following:
 - III. F. 6. As used herein, the phrase "spouse or domestic partner" is deleted and replaced with "spouse or party to a civil union".
- 5. The first paragraph of section V. Policy Conditions D. Other Insurance is deleted and replaced with the following:
 - V. D. Any Claim insured under any other insurance policy or risk transfer instrument which applies to a covered Claim, shall be paid first by those instruments, policies or other arrangements. This Policy will not serve as primary insurance where there is other applicable insurance. It is the intent of this Policy to apply only to Claim Expenses and / or Damages which are more than the total limit of all deductibles, limits of liability, self-insured amounts or other valid and collectible insurance or risk transfer arrangements, whether primary, contributory, excess, contingent, or otherwise. If the Insured has other insurance provided by other companies against a loss covered by this policy, the Insurer shall not be liable under this policy for a greater proportion of such loss and claims expenses than the applicable Limit of Liability stated in the Declarations bears to the total applicable Limit of Liability of all valid and collectable insurance against such Claim Expenses and / or Damages.

Notwithstanding the foregoing, if two or more policies of Lawyers Professional Liability Insurance issued by the **Insurer** covering the **Insured** apply to the same **Claim** for which the **Insured** is jointly and severally liable, the **Insurer** shall not be liable under this Policy for a greater proportion of such **Damages** and / or **Claim Expenses** than the **Insurer's** liability under this Policy bears to the **Insurer's** total liability under all applicable valid and collectible insurance issued by the **Insurer**. Further, the **Insurer** shall not pay on the **Insured's** behalf any sum that exceeds the highest limit of liability of the Policies issued by the **Insurer**. In such circumstances, the **Insured** will not be responsible under this Policy for a greater proportion of the deductible than the **Insured's** responsibility under this Policy bears to the **Insured's** total responsibility for all applicable deductibles, provided that the **Insured** will not be responsible for any amount that exceeds the deductible of that Policy issued by the **Insurer** that has the highest applicable deductible.

- 6. Section V. K. Cancellation or Nonrenewal sub-paragraph 2. of this policy is deleted in its entirety and replaced with the following:
 - V. K. 2. The **Insurer** may cancel or non-renew this Policy by written notice to the **Named Insured** at the address last known to the **Insurer**.

The **Insurer** will provide written notice at least 60 days before cancellation or non-renewal is to be effective. If the **Insurer** cancels this Policy because the **Insured** has failed to pay a premium when due or has failed to pay amounts in excess of the limit of the **Insurer's** liability or within the amount of the deductible, this Policy may be canceled by the **Insurer** by mailing to the **Named Insured** written notice stating when, not less than 10 days thereafter, such cancellation shall be effective.

If this Policy has been in effect for less than 60 days, the Insurer may cancel for any reason.

If this Policy has been in effect for 60 days or more, the **Insurer** may only cancel this **Policy** for one of the following reasons:

Insured Caraway & Broombaugh, P.C.		Policy Number PLP-1499184-P7
Effective Date of This Endorsement 06/01/2022	Authorized Repres	sentative

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(i)	nonpayment	of	premium;
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- (ii) the Policy was obtained through a material misrepresentation;
- (iii) any Insured violated any of the terms and conditions of the Policy;
- (iv) the risk originally accepted has measurably increased;
- (v) Certification to the Director of the loss of reinsurance by the **Insurer** which provided coverage to the **Insurer** for all or a substantial part of the underlying risk insured; or
- (vi) a determination by the Director that the continuation of the policy could place the **Insurer** in violation of the insurance laws of this State.

The time of surrender of this Policy or the effective date and hour of cancellation stated in the notice shall become the end of the **Policy Period**. Delivery (where permitted by law) of such written notice either by the **Named Insured** or by the **Insurer** shall be equivalent to mailing.

- 7. Section V. Policy Conditions L. Entire Contract sub-paragraph 4. of this Policy is deleted in its entirety and replaced with the following:
 - V. L. 4. any misrepresentation or fraud that materially affects the acceptance of the risk or the hazard assumed by the Insurer and made by the Insured or with the Insured's knowledge with the intent to deceive while applying for this Policy or in pursuing a Claim under this Policy shall be deemed grounds for denial of coverage or cancellation of this Policy.
- 8. Section VI. Extended Reporting Periods C. of this Policy is deleted in its entirety.

Insured		Policy Number
Caraway & Broombaugh, P.C.		PLP-1499184-P7
Effective Date of This Endorsement 06/01/2022	Authorized Representative	

Berkley Insurance Company

Lawyers Professional Liability Insurance Policy

CLAIMS MADE NOTICE FOR POLICY

NOTICE: THIS POLICY PROVIDES COVERAGE ON A CLAIMS MADE AND REPORTED BASIS SUBJECT TO ITS TERMS. THIS POLICY APPLIES ONLY TO ANY CLAIM FIRST MADE AGAINST THE INSUREDS AND REPORTED TO THE INSURER DURING THE POLICY PERIOD OR ANY EXTENDED REPORTING PERIOD THAT MAY APPLY.

PLEASE READ AND REVIEW THE POLICY CAREFULLY AND DISCUSS THE COVERAGE WITH YOUR INSURANCE AGENT OR BROKER.

In consideration of the payment of the premium, in reliance on all statements in the application and all other information provided to the **Insurer**, and subject to all provisions of this Policy, the **Insurer** and **Insureds** agree as follows:

I. Insuring Agreement

A. Lawyers Professional Liability Insurance Coverage

The Insurer agrees to pay on behalf of the Insured all sums in excess of the deductible, up to the Limit of Liability, that the Insured shall become legally obligated to pay as Damages and Claim Expenses because of a Claim that is both first made against the Insured and reported in writing to the Insurer during the Policy Period or any Extended Reporting Period, if applicable, by reason of an act or omission in the performance of Legal Services by the Insured or by any person for whom the Insured is legally liable, provided that:

- 1, no Insured gave notice to a Prior Insurer of such Claim or a Related Claim; and
- 2. no Insured gave notice to a Prior Insurer of any such act or omission or Related Act or Omission; and
- 3. prior to the date an Insured first becomes an Insured under this Policy or became an Insured under the first policy issued by the Insurer (or its subsidiary or affiliated insurers) to the Named Insured or any Predecessor Firm, whichever is earlier, of which this Policy is a renewal or replacement, no Insured had a basis to believe that any such act or omission, or Related Act or Omission, might reasonably be expected to be the basis of such Claim.

B. Defense

The Insurer shall have the right and duty to defend, in the Insured's name and on the Insured's behalf, a Claim seeking Damages covered by this Policy even if any of the allegations of the Claim are groundless, false or fraudulent. The Insurer shall have the right to appoint counsel and to make such investigation and defense of a Claim as is deemed necessary by the Insurer. If a Claim shall be subject to arbitration or mediation, the Insurer shall be entitled to exercise all of the Insured's rights in the choice of arbitrators or mediators and in the conduct of an arbitration or mediation proceeding.

C. Settlement

The Insurer shall not settle any Claim without the Named Insured's consent. If, however, the Named Insured shall refuse to consent to any settlement recommended by the Insurer, which is acceptable to the claimant, and shall elect to contest the Claim, or continue any legal, administrative, or arbitration proceedings in connection with such Claim, then the Insurer's liability for the Claim shall not exceed the amount for which the Claim could have been settled, including Claim Expenses incurred up to the date of such refusal. Such amounts are subject to the provisions of section II. Limits of Liability and Deductible. In the event that the Named Insured refuses to consent to any settlement recommended by the Insurer, which is acceptable to the claimant, the Insurer's right and duty to defend such Claim shall end upon the date of such refusal.

D. Exhaustion of Limit

The Insurer is not obligated to investigate, defend, pay or settle, or continue to investigate, defend, pay or settle a Claim after the applicable limit of the Insurer's liability has been exhausted by payment of Damages or Claim Expenses or by any combination thereof or after the Insurer has deposited the remaining available Limit of Liability into a court of competent jurisdiction. In such case, the Insurer shall have the right to withdraw from the further investigation, defense, payment or settlement of such Claim by tendering control of said investigation, defense or settlement of the Claim to the Insured.

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II. Limits of Liability and Deductible

A. Claim Expenses Reduce the Limit of Liability

- 1. If option A. "Claim Expenses Reduce the Limit of Liability" is purchased as indicated in Item 5. of the Declarations, the Limit of Liability stated in Item 3. A. of the Declarations is the Insurer's Limit of Liability for all Damages and Claim Expenses arising out of each Claim first made against the Insured and reported to the Insurer during the Policy Period and any Extended Reporting Period(s) that may apply.
- 2. The Limit of Liability stated in Item 3. B. of the Declarations is the **Insurer's** maximum aggregate Limit of Liability for all **Damages** and **Claim Expenses** arising out of all **Claims** first made against the **Insured** and reported to the **Insurer** during the **Policy Period** and any Extended Reporting Period(s) that may apply regardless of the number of **Insureds**, **Claims** made, or persons or entities bringing such **Claims**.

B. Claim Expenses in Addition to the Limit of Liability

- 1. If option B. "Claim Expenses in Addition to the Limit of Liability" is purchased as indicated in Item 5. of the Declarations, the Limit of Liability stated in Item 3. A. of the Declarations is the Insurer's Limit of Liability for all Damages arising out of each Claim first made against the Insured and reported to the Insurer during the Policy Period and any Extended Reporting Period(s) that may apply. There shall be a separate and equal Limit of Liability applicable to Claim Expenses for any such Claim.
- 2. The Limit of Liability stated in Item 3. B. of the Declarations is the Insurer's maximum aggregate Limit of Liability for all Damages arising out of all Claims first made against the Insured and reported to the Insurer during the Policy Period and any Extended Reporting Period(s) that may apply regardless of the number of Insureds, Claims made, or persons or entities bringing such Claims. There shall be a separate and equal aggregate Limit of Liability applicable to Claim Expenses for all Claims first made against the Insured and reported to the Insurer during the Policy Period and any Extended Reporting Period(s) that may apply, regardless of the number of Insureds, Claims made, or persons or entities bringing such Claims.

C. Deductible

- 1. If option A. "Aggregate Deductible All Claims" is selected in Item 6. of the Declarations, the Deductible amount stated in Item 6. A. is the total amount of the Insured's liability for all Claims first made and reported to the Insurer during the Policy Period. The Deductible shall be paid by the Named Insured, or upon the Named Insured's failure to pay, jointly and severally by all Insureds against whom the Claim is made. The Limits of Liability set forth in the Declarations are in addition to and in excess of the Deductible.
- 2. If option B. "Each Claim Deductible" is purchased in Item 6. of the Declarations, the Deductible amount shall apply to each and every Claim first made and reported to the Insurer during the Policy Period. The Deductible shall be paid by the Named Insured, or upon the Named Insured's failure to pay, jointly and severally by all Insureds against whom the Claim is made. The Limits of Liability set forth in the Declarations are in addition to and in excess of the Deductible.
- 3. If option i. "Deductible applies to **Damages** and **Claim Expenses**" is selected as indicated in Item 6. of the Declarations, the **Insurer** shall be liable for the amount of **Damages** and / or **Claim Expenses** arising from a **Claim** which is in excess of the Deductible amount stated in Item 6. of the Declarations.
- 4. If option ii. "Deductible applies only to **Damages**" is purchased as indicated in Item 6. of the Declarations, the **Insurer** shall be liable for the amount of **Damages** arising from a **Claim** which is in excess of the Deductible stated in Item 6. of the Declarations. No Deductible shall apply to **Claim Expenses**.
- 5. The Insurer has the right, but not the obligation, to advance any Damages and / or Claim Expenses within the Deductible. Any funds advanced by the Insurer shall serve to reduce the Limits of Liability. If the Insurer brings suit to collect the Deductible, then the Insured responsible to pay the Deductible also shall pay the legal fees, costs and expenses incurred by the Insurer to collect the Deductible.

D. Multiple Insureds, Claims and Claimants

The Limits of Liability shown in the Declarations and subject to the provisions of this Policy is the maximum amount the **Insurer** will pay as **Damages** and **Claim Expenses** regardless of the number of **Insureds**, **Claims** made or persons or entities making **Claims**. If **Related Claims** are subsequently made against the **Insured** and reported to the **Insurer**, all such **Related Claims**, whenever made, shall be considered a single **Claim** first made and reported to the **Insurer** within the **Policy Period** in which the earliest of the **Related Claims** was first made and reported to the **Insurer**.

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E. Aggregate Limit for Supplemental Coverages

For the Supplemental Coverages described in this section II. E., the Insurer shall reimburse the Insureds, up to the aggregate limit stated in Item 4. of the Declarations. The Limit for Supplemental Coverages shall be in addition to the Limits stated in Item 3. of the Declarations. No Deductible shall apply to any of the Supplemental Coverages listed in this section II. E.

In no event shall the amount payable for the Supplemental Coverages per **Policy Period** exceed the aggregate limit stated in Item 4, of the Declarations for the Supplemental Coverages despite the number of **Insureds** hereunder, the number of potential **Claims** or the number of proceedings.

1. Attendance at Trial

If during the **Policy Period** the **Insurer** requests an **Insured**'s attendance at a trial, hearing or other alternative dispute resolution proceeding (including arbitration proceeding or mediation) in connection with a **Claim** against such **Insured**, then the **Insurer** will pay for actual loss of earnings and reasonable costs incurred by the **Insured** to attend.

2. Disciplinary Proceedings

The Insurer will reimburse the Named Insured for attorney fees and other reasonable costs, expenses or fees (the "Disciplinary Fees") paid to third parties (other than an Insured) resulting from any one Disciplinary Proceeding incurred as the result of a notice of such Disciplinary Proceeding both first received by the Insured and reported in writing to the Insurer either during the Policy Period or within 60 days after termination of the Policy Period, arising out of an act or omission in the rendering of Legal Services by such Insured committed prior to the expiration of the Policy Period.

3. Subpoena Assistance

If during the **Policy Period** the **Insured** receives a subpoena for documents or testimony arising out of **Legal Services** rendered by the **Insured** and the **Insured** would like the **Insurer**'s assistance in responding to the subpoena, the **Insured** may provide the **Insurer** with a copy of the subpoena and the **Insurer** will retain an attorney to provide advice regarding the production of documents, to prepare the **Insured** for sworn testimony, and to represent the **Insured** at the **Insured**'s depositions, provided that:

- a. the subpoena arises out of a lawsuit to which the Insured is not a party; and
- b. the **Insured** has not been engaged to provide advice or testimony in connection with the lawsuit, nor has the **Insured** provided such advice or testimony in the past.

The Insurer will pay such attorney's legal fees excluding any disbursements. Any notice the Insured gives the Insurer of such subpoena shall be deemed notification of a potential Claim under section V. A. Notice of Claims.

4. Pre-Claim Assistance

Until the date a **Claim** is made, the **Insurer** may pay for all costs or expenses it incurs, at its sole discretion, as a result of investigating a potential **Claim** that the **Insured** reports in accordance with section V. A. Notice of Claims, sub-paragraph 2. Such payments are in addition to the Limit of Liability and not subject to the deductible.

F. Risk Management Incentives

Mediation

If mediation of a Claim takes place either without institution of arbitration proceeding or service of suit or within 60 days of the institution of such proceedings or service of suit, and such Claim is ultimately resolved for an amount acceptable to the Insured and the Insurer by the process of mediation, the Insured's deductible, applying to the Claim, will be reduced by 50%. In no event shall the amount of the deductible waived hereunder exceed \$10,000.

III. Definitions

Whenever printed in boldface type, and whether in the singular or plural form in this Policy, the following terms shall have the meanings indicated below.

- A. Bodily Injury means injury to the body, sickness or disease sustained by any person, including death resulting from such injuries; or mental injury, mental anguish, mental tension, emotional distress, pain or suffering or shock sustained by any person whether or not resulting from injury to the body, sickness, disease or death of any person.
- B. Claim means a demand for money or services, including the service of suit or the institution of any alternative dispute resolution proceeding, received by the Insured arising out of an act or omission, including Personal Injury, in the rendering of, or failure to render Legal Services.

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C. Claim Expenses means:

- 1. fees charged by attorneys designated by the Insurer or by the Insured with the Insurer's written consent;
- 2. all other reasonable and necessary fees, costs and expenses resulting from the investigation, adjustment, defense and appeal of a Claim if incurred by the Insurer, or by the Insured with the written consent of the Insurer, including, but not limited to, premiums for any appeal bond, attachment bond or similar bond but without any obligation of the Insurer to apply for or furnish any such bond;
- 3. all costs taxed against an Insured in defense of a Claim; or
- 4. all interest on the entire amount of any judgment which accrues after entry of the judgment and before the **Insurer** has paid that part of the judgment which does not exceed the Limit of Liability stated in Item 3. A. of the Declarations for each **Claim**.

Claim Expense with respect to a covered Claim will be paid first and payment will reduce the amount available to pay Damages. Claim Expenses do not include fees, costs or expenses of employees or officers of the Insurer. Nor shall Claim Expenses include salaries, loss of earnings or other remuneration by or to any Insured.

- D. Damages means judgments, awards and settlements (including pre-judgment interest), provided all settlements are negotiated with the assistance and approval of the Insurer. Damages also includes punitive and exemplary damages, and the multiple portions thereof, to the extent that such damages are insurable under the law of the most favorable applicable jurisdiction. Damages do not include:
 - 1. legal fees, costs and expenses paid or incurred or charged by any **Insured**, no matter whether claimed as restitution of specific funds, forfeiture, financial loss, set-off or otherwise, and injuries that are a consequence of any of the foregoing;
 - civil or criminal fines, sanctions, penalties or forfeitures, whether pursuant to law, statute, regulation or court rule, including but not limited to awards under 18 U.S.C. §1961, et. seq., Federal Rules of Civil Procedure 11 or 28 U.S.C. §1927 and state statutes, regulations, rules or law so providing, and injuries that are a consequence of any of the foregoing;
 - 3. injunctive or declaratory relief; or
 - 4. any amount for which an Insured is absolved from payment by reason of any covenant, agreement or court order.
- E. Disciplinary Proceeding means any pending disciplinary matter including an initial inquiry, before a state or federal licensing board or a peer review committee to investigate charges alleging a violation of any rule of professional conduct in the performance of Legal Services.
- F. Insured means the Named Insured, Predecessor Firm and the persons or entities described below:
 - any lawyer, partnership, professional corporation, professional association, limited liability company or limited liability partnership who is or becomes a partner, officer, director, stockholder-employee, associate, manager, member or employee of the Named Insured during the Policy Period shown in the Declarations;
 - any lawyer previously affiliated with the Named Insured or a Predecessor Firm as a partner, officer, director, stockholder-employee, associate, manager, member or salaried employee but only for Legal Services performed on behalf of the Named Insured or a Predecessor Firm at the time of such affiliation;
 - 3. any lawyer, law firm, partnership, professional corporation, professional association, limited liability company or limited liability partnership who acts as Of Counsel to the Named Insured or any non-employee independent contractor attorney to the Named Insured, but only for Legal Services rendered on behalf of the Named Insured and only if a fee inured or, in the event of a contingency fee, would have inured, to the Named Insured. No fee need inure to the Named Insured where pro bono Legal Services are rendered by such Of Counsel Insured where at the time of retention, there was approval by the appropriate committee or lawyer within the Named Insured that the matter would be handled without compensation. Any lawyer, law firm, partnership, professional corporation, professional association, limited liability company or limited liability partnership who previously qualified as an Insured under sub-paragraph 1. above, but gave up the position of partner, officer, director, stockholder-employee, associate, manager, member or employee to act exclusively as Of Counsel to the Named Insured, will be deemed to be an Insured under sub-paragraph 1. above;
 - 4. any person who is a former or current employee of the Named Insured or any Predecessor Firm and not a lawyer, but solely for services performed by such person within the course and scope of their employment by the Named Insured or any Predecessor Firm and provided that the services in dispute are Legal Services of the Named Insured or any Predecessor Firm:
 - the estate, heirs, executors, administrators, assigns, and legal representatives of an Insured in the event of such Insured's death, incapacity, insolvency or bankruptcy, but only to the extent that such Insured would have been provided coverage under this Policy; or

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- 6. the spouse or domestic partner of an Insured; provided, however, coverage is only afforded to such spouse or domestic partner only for a Claim arising solely out of their status as such and where such Claim seeks damages from marital community property, jointly held property or property transferred from an Insured to the spouse or domestic partner. No coverage is provided for any act or omission of an estate, heir, legal representative, assign, spouse or domestic partner.
- G. Insurer means the entity issuing this Policy as listed on the Declarations Page.

H. Legal Services means:

- those services, including pro bono services, performed by an Insured for others as a lawyer, arbitrator, mediator, title agent or other neutral fact finder or as a notary public. Any title agency or insurer, on whose behalf the Insured acts as title agent or designated issuing attorney, is not an Insured under this Policy unless such title agency is a wholly owned subsidiary of the Named Insured;
- 2. those services performed by an **Insured** as an administrator, conservator, receiver, executor, guardian, trustee or in any other fiduciary capacity;
- 3. those services performed by an **Insured** in their capacity as a member of a bar association, ethics, peer review, formal accreditation, licensing, or similar professional board or committee related to the legal profession, or
- 4. those services performed by an **Insured** as an author, strictly in the publication or presentation of research papers or similar materials and only if the fees, royalties or other revenue generated from such work are not greater than \$10,000.

For the purpose of this definition, services performed by an **Insured** in a lawyer-client relationship on behalf of one or more clients shall be deemed **Legal Services** in the **Insured's** capacity as a lawyer, although such services could be performed wholly or in part by non-lawyers.

- I. Named Insured means the persons and entities designated in Item 1. of the Declarations.
- J. Personal Injury means an injury arising out of: false arrest, detention, or imprisonment; wrongful entry, or eviction, or other invasion of the right of private occupancy; libel, slander, or other disparaging or defamatory materials; a writing or saying in violation of an individual's right to privacy; malicious prosecution or abuse of process.
- K. Policy Period means the period of time from the inception date shown in Item 2, of the Declarations to the earlier of the expiration date shown in Item 2, of the Declarations or the effective date of cancellation of this Policy.
- L. Predecessor Firm means any sole proprietorship, partnership, professional corporation, professional association, limited liability corporation or limited liability partnership engaged in Legal Services and:
 - 1. to whose financial assets and liabilities the firm listed as the **Named Insured** in the Declarations is the majority successor in interest; or
 - 2. of which the Named Insured retained 50% or more of the lawyers; or
 - 3. was previously deemed to be a **Predecessor Firm** under the lawyers professional liability policy issued by the **Insurer** immediately preceding this Policy.
- M. Prior Insurer means an insurer, including the Insurer and any subsidiary or affiliate of the Insurer, who has issued a lawyers professional liability insurance policy that is applicable to a Claim, such policy having an inception date prior to the Policy Period.
- N. Related Acts or Omissions means all acts or omissions in the rendering of Legal Services that are temporally, logically or causally connected by any common fact, circumstance, situation, transaction, event, advice or decision.
- O. Related Claims means all Claims arising out of a single act or omission or arising out of Related Acts or Omissions in the rendering of Legal Services.

IV. Exclusions

This Policy does not apply:

A. Intentional Acts

to any Claim based on, or arising out of, or in any way involving any dishonest, fraudulent, criminal, malicious act or omission or intentional wrongdoing by an Insured; provided, however:

- 1. this exclusion shall not apply to Personal Injury;
- the Insurer shall provide the Insured with a defense of such Claim unless or until the dishonest, fraudulent, criminal, malicious act or omission or intentional wrongdoing has been determined by any trial verdict, court ruling, regulatory ruling or legal admission, whether appealed or not. Such defense will not waive any of the Insurer's rights under this Policy. Criminal proceedings are not covered under this Policy regardless of the allegations made against any Insured;
- this exclusion will not apply to any Insured who is not found to have personally committed the dishonest, fraudulent, criminal, malicious act or omission or intentional wrongdoing by any trial verdict, court ruling, or regulatory ruling.

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B. Bodily Injury / Property Damage

to any Claim for Bodily Injury, or injury to, or destruction of, any tangible property, including the loss of use resulting therefrom; provided, however, this exclusion for Bodily Injury does not apply to mental injury, mental anguish, mental stress, humiliation or emotional distress caused by Personal Injury;

C. Status as Beneficiary or Distributee

to any loss sustained by an **Insured** or **Claim** made against an **Insured** as beneficiary or distributee of any trust or estate:

D. Contractual Liability

to any **Claim** based on, or arising out of, or in any way involving an **Insured**'s alleged liability under any oral or written contract or agreement, unless such liability would have attached to any **Insured** in the absence of such agreement;

E. Insured vs. Insured

to any Claim by or on behalf of an Insured under this Policy against any other Insured hereunder; unless such Claim arises out of Legal Services by an Insured rendered to such other Insured as a client;

F. Capacity as Director, Officer, Fiduciary

to any Claim based on, or arising out of, or in any way involving an Insured's capacity as:

- 1. a former, existing or prospective officer, director, shareholder, partner, manager or member (or any equivalent position) of any entity if such entity is not named in the Declarations;
- 2. a trustee of a pension, welfare, profit-sharing, mutual or investment fund or investment trust; or
- 3. a fiduciary under the Employee Retirement Income Security Act of 1974 and its amendments or any regulation or order issued pursuant thereto or any other similar state or local law;

provided, however, this exclusion does not apply to a **Claim** based on, or arising out of an **Insured's** capacity as a member, director or officer of any professional legal association, including any Bar Association and any similar organization or association, its governing board or any of its committees;

G. Capacity as Public Official

to any Claim based on, or arising out of, or in any way involving an Insured's capacity as a public official or an employee or representative of a governmental body, subdivision or agency unless such Insured is deemed as a matter of law to be a public official or employee or representative of such entity solely by virtue of rendering Legal Services to it;

H. Owned Entity

to any Claim based on, or arising out of, or in any way involving Legal Services performed, directly or indirectly, for any entity not named in the Declarations, if at the time of the act or omission giving rise to the Claim, the percentage of ownership interest, direct or indirect, in such entity by any Insured, or an accumulation of Insureds, exceeded 10%;

I. Funds Exclusion

to any Claim based on, or arising out of, or in any way involving the actual or alleged conversion, misappropriation or improper commingling of client funds;

J. Securities Exclusion

to any Claim based on, or arising out of, or in any way involving:

- 1. the promotion, sale or solicitation for sale of securities, real estate, or other investments by any Insured; or
- recommendations, representations, or opinions concerning specific investment advice by any Insured or any
 person or organization referred to by any Insured or any person or organization referred to by any Insured in
 connection with portfolio or trust account management, or the performance or nonperformance of securities, real
 estate, or other investments;

K. Personal Profit Exclusion

to any **Claim** based on, or arising out of, or in any way involving any **Insured** having gained any personal profit or advantage to which he or she was not legally entitled;

L. Employee Retirement Income Security Act Exclusion

to any Claim based on, or arising out of, or in any way involving any actual or alleged violations of the Employee Retirement Income Security Act of 1974 and amendments thereto by any Insured while acting as a fiduciary within the meaning of said Act; provided, however, this exclusion shall not apply to a Claim arising out of an act or omission committed by an Insured in the performance of Legal Services to a fiduciary as otherwise provided by the Policy.

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V. Policy Conditions

A. Notice of Claims

1. Notifying the Insurer of Claims

The **Insured**, as a condition precedent to the obligations of the **Insurer** under this Policy, shall as soon as reasonably possible after learning of a **Claim**, give written notice to the **Insurer** during the **Policy Period** of such **Claim**. The **Insurer** agrees that the **Insured** may have up to, but not more than, 60 days after the expiration of the **Policy Period** to report a **Claim** made against the **Insured** during the **Policy Period** provided the reporting of such **Claim** is as soon as reasonably possible.

2. Notifying the Insurer of Potential Claims

If during the **Policy Period** the **Insured** becomes aware of any act or omission that may reasonably be expected to be the basis of a **Claim** against the **Insured** and gives written notice to the **Insurer** of such act or omission and the reasons for anticipating a **Claim** with full particulars, including but not limited to:

- a. the specific act or omission;
- b. the dates and persons involved;
- c. the identity of anticipated or possible claimants; and
- d. the circumstances by which the **Insured** first became aware of the possible **Claim**;

then any such Claim that arises out of such reported act or omission and that is subsequently made against the **Insured** and reported to the **Insurer** shall be deemed to have been made at the time such written notice was given to the **Insurer**.

B. Reimbursement of the Insurer

Subject to the **Insured's** right to consent to settlement as set forth in section I. C. Settlement, if the **Insurer**, in the exercise of its discretion and without any obligation to do so, pays any amount within the amount of the deductible then such amounts shall, upon written demand by the **Insurer**, be paid by the **Named Insured** within 30 days. If the **Named Insured** fails to pay the deductible, then all the **Insureds** shall be jointly and severally obligated to pay the deductible. Any funds advanced by the **Insurer**, at its option, shall serve to reduce the Limit of Liability. If the **Insurer** brings suit to collect the deductible, then the **Insured** responsible to pay the deductible also shall pay the legal fees, costs and expenses incurred by the **Insurer** to collect the deductible.

C. Territory

This Policy applies to an act or omission taking place anywhere in the world, provided that the **Claim** is made and suit is brought against the **Insured** within the United States of America, including its territories, possessions, Puerto Rico or Canada.

D. Other Insurance

Any Claim insured under any other insurance policy or risk transfer instrument which applies to a covered Claim, shall be paid first by those instruments, policies or other arrangements. This Policy will not serve as primary insurance where there is other applicable insurance. It is the intent of this Policy to apply only to Claim Expenses and / or Damages which are more than the total limit of all deductibles, limits of liability, self-insured amounts or other valid and collectible insurance or risk transfer arrangements, whether primary, contributory, excess, contingent, or otherwise. This Policy will not contribute with any other applicable insurance.

Notwithstanding the foregoing, if two or more policies of Lawyers Professional Liability Insurance issued by the Insurer covering the Insured apply to the same Claim for which the Insured is jointly and severally liable, the Insurer shall not be liable under this Policy for a greater proportion of such Damages and / or Claim Expenses than the Insurer's liability under this Policy bears to the Insurer's total liability under all applicable valid and collectible insurance issued by the Insurer, Further, the Insurer shall not pay on the Insured's behalf any sum that exceeds the highest limit of liability of the Policies issued by the Insurer. In such circumstances, the Insured will not be responsible under this Policy for a greater proportion of the deductible than the Insured's responsibility under this Policy bears to the Insured's total responsibility for all applicable deductibles, provided that the Insured will not be responsible for any amount that exceeds the deductible of that Policy issued by the Insurer that has the highest applicable deductible.

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E. Assistance and Cooperation of the Insured

- The Insured shall cooperate with the Insurer and, upon the Insurer's request, shall attend hearings and trials and shall assist in effecting settlements, securing and giving of evidence, obtaining the attendance of witnesses, and the conduct of suits and proceedings in connection with a Claim.
- 2. The **Insured** shall assist in the enforcement of any right of contribution or indemnity against any person or organization who or which may be liable to any **Insured** in connection with a **Claim**.
- The Insured shall not, except at its own cost, voluntarily make any payment, assume or admit any liability or incur any expense without the consent of the Insurer.

F. Action Against the Insurer

No action shall lie against the Insurer by any third party, unless, as a condition precedent thereto:

- 1. there shall have been full compliance with all the terms of this Policy; and
- 2. the **Insured's** obligation to pay shall have been finally determined either by judgment against the **Insured** after actual trial or by written agreement of the **Insured**, the claimant and the **Insurer**.

Any person or organization or the legal representative thereof who has secured such judgment or written agreement shall thereafter be entitled to recover under this Policy to the extent of the insurance afforded by this Policy. No person or organization shall have any right under this Policy to join the **Insurer** as a party to any action against an **Insured**, nor shall the **Insurer** be impleaded by the **Insured** or his legal representative.

G. Bankruptcy or Insolvency

Bankruptcy or insolvency of the **Insured** or of the **Insured's** estate shall not relieve the **Insurer** of any of its obligations hereunder.

H. Subrogation

In the event of any payment under this Policy, the **Insurer** shall be subrogated to all the **Insured's** rights of recovery thereof against any person or organization. The **Insured** shall execute and deliver instruments and papers and do whatever else is necessary to secure and collect upon such rights. The **Insured** shall do nothing to prejudice such rights.

I. Changes

Notice to any of the **Insurer's** agents or knowledge possessed by any such agent or any other person shall not act as a waiver or change in any part of this Policy. It also will not prevent the **Insurer** from asserting any rights under the provisions of this Policy. None of the provisions of this Policy will be waived, changed or modified except by written endorsement, issued to form a part of this Policy.

J. Assignment

No assignment of interest of the **Insured** under this Policy shall be valid, unless the written consent of the **Insurer** is endorsed hereon.

K. Cancellation/ Nonrenewal

- 1. This Policy may be canceled by the **Named Insured** by returning it to the **Insurer**. The **Named Insured** may also cancel this Policy by written notice to the **Insurer** stating at what future date cancellation is to be effective.
- 2. The Insurer may cancel or non-renew this Policy by written notice to the Named Insured at the address last known to the Insurer. The Insurer will provide written notice at least 60 days before cancellation or non-renewal is to be effective. If the Insurer cancels this Policy because the Insured has failed to pay a premium when due or has failed to pay amounts in excess of the limit of the Insurer's liability or within the amount of the deductible, this Policy may be canceled by the Insurer by mailing to the Named Insured written notice stating when, not less than 10 days thereafter, such cancellation shall be effective. The time of surrender of this Policy or the effective date and hour of cancellation stated in the notice shall become the end of the Policy Period. Delivery (where permitted by law) of such written notice either by the Named Insured or by the Insurer shall be equivalent to mailing.
- 3. If the **Insurer** cancels this Policy, the earned premium shall be computed pro rata. If the **Named Insured** cancels this Policy, the **Insurer** shall retain the customary short rate proportion of the premium. Premium adjustment may be made either at the time cancellation is effected or as soon as practicable after cancellation becomes effective, but payment or tender of unearned premium is not a condition of cancellation.
- 4. The offering of terms and conditions different from the expiring terms and conditions shall not constitute a refusal to renew.

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L. Entire Contract

By acceptance of this Policy the Insured agrees that:

- 1. all of the information and statements provided to the **Insurer** by the **Insured** are true, accurate and complete and shall be deemed to constitute material representations made by all of the **Insureds**; and
- 2, this Policy is issued in reliance upon the Insured's representations; and
- 3. this Policy, endorsements thereto, together with the completed and signed application and any and all supplementary information and statements provided by the **Insured** to the **Insurer** (all of which are deemed to be incorporated herein) embody all of the agreements existing between the **Insured** and the **Insurer** and shall constitute the entire contract between the **Insured** and the **Insurer**; and
- 4. any material misrepresentation or fraud made by the **Insured** or with the **Insured**'s knowledge in applying for this Policy or in pursuing a **Claim** under this Policy shall be deemed grounds for denial of coverage or cancellation of this Policy.

M. Named Insured as Sole Agent

The **Named Insured** shall be the sole agent of all **Insureds** hereunder for the purpose of effecting or accepting any notices hereunder, any amendments to or cancellation of this Policy, for the completing of any applications and the making of any statements, representations and warranties, for the payment of any premium and the receipt of any return premium that may become due under this Policy, and the exercising or declining to exercise any right under this Policy.

N. Liberalization

If at any time during the **Policy Period** the **Insurer** adopts any revision that would broaden coverage under this Policy form LPL 39450 without additional premium, such broadened coverage will immediately apply to this Policy for **Claims** made and reported to the **Insurer**: 1) after the effective date such revision was filed and approved in the state in which the **Insured** is domiciled; and 2) during the **Policy Period**. In no event shall such revision apply to **Claims** that were first made against the **Insured** prior to the effective date of such revision.

O. Notices

Any notices required to be given by an **Insured** shall be submitted in writing to the **Insurer** or its authorized representative. If mailed, the date of mailing of such notice shall be deemed to be the date such notice was given and proof of mailing shall be sufficient proof of notice.

P. Trade and Economic Sanctions

This policy does not provide coverage for **Insureds**, transactions or that part of **Damages** or **Claim Expenses** that is uninsurable under the laws or regulations of the United States concerning trade or economic sanctions.

Q. Changes to the Firm

If during the **Policy Period** there is a 50% or greater change in the **Named Insured's** total lawyer population, then the **Named Insured** shall give the **Insurer** written notice of such changes as soon as practicable but not later than 60 days after the effective date of such change. The **Named Insured** shall accept any premium adjustment or coverage revisions which the **Insurer** may require.

R. Policy Headings

The descriptions in the headings of this Policy are solely for convenience, and form no part of the terms and conditions of coverage.

VI. Extended Reporting Periods

As used herein, "Extended Reporting Period" means the period of time after the end of the **Policy Period** for reporting **Claims** that are first made against the **Insured** during the applicable Extended Reporting Period by reason of an act or omission that occurred prior to the end of the **Policy Period** and is otherwise covered by this Policy.

A. Automatic Extended Reporting Period

- 1. If this Policy is canceled or non-renewed by either the **Insurer** or by the **Named Insured**, the **Insurer** will provide to the **Named Insured** an automatic, non-cancelable 60 day Extended Reporting Period starting at the termination of the **Policy Period** only if there is no other policy or policies that would otherwise provide insurance for such act or omission. This Automatic Extended Reporting Period will terminate after 60 days.
- 2. The **Insurer's** liability for all **Claims** reported during the Automatic Extended Reporting Period shall be part of and not in addition to the Limit of Liability for the **Policy Period** as set forth in the Declarations and section II. Limit of Liability and Deductible.

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B. Optional Extended Reporting Period

- 1. If this Policy is canceled or non-renewed by either the **Insurer** or by the **Named Insured**, then the **Named Insured** shall have the right to purchase an Optional Extended Reporting Period. Such right must be exercised by the **Named Insured** within 60 days of the termination of the **Policy Period** by providing:
 - a. written notice to the Insurer; and
 - b. with the written notice, the amount of additional premium described below.
- 2. The additional premium for the Optional Extended Reporting Period shall be based upon the rates for such coverage in effect on the date this Policy was issued or last renewed and shall be for 1 year at 100% of such premium; 2 years at 150% of such premium; 3 years at 175% of such premium; 6 years at 225% of such premium; or an unlimited period for 250% of such premium.
- 3. The premium for the Optional Extended Reporting Period is due on its effective date. This Optional Extended Reporting Period is non-cancelable and the entire premium shall be deemed fully earned at its commencement without any obligation by the **Insurer** to return any portion thereof.
- 4. The **Insurer's** liability for all **Claims** reported during the Optional Extended Reporting Period shall be part of and not in addition to the Limit of Liability for the **Policy Period** as set forth in the Declarations and section II. Limit of Liability and Deductible.

C. Elimination of Right to any Extended Reporting Period

There is no right to any Extended Reporting Period:

- 1. if the Insurer shall cancel or refuse to renew this Policy due to:
 - a. non-payment of premiums;
 - b. non-compliance by an **Insured** with any of the terms and conditions of this Policy; or
 - c. any misrepresentation or omission in the application for this Policy;
- 2. if during the **Policy Period** such **Insured's** right to practice law is revoked, suspended or surrendered at the request of any regulatory authority.

D. Extended Reporting Period is Not a New Policy

It is understood and agreed that the Extended Reporting Period shall not be construed to be a new policy and any Claim submitted during such period shall otherwise be governed by this Policy.

In witness whereof, the **Insurer** has caused this Policy to be signed by its President and Chief Executive Officer and Secretary, but this Policy shall not be valid unless countersigned on the Declarations Page by a duly authorized representative of the **Insurer**.

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Berkley Insurance Company

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Purchase of Optional Extended Reporting Period

In consideration of the payment of the additional premium of premium of the surface of this Policy, the Named Insured has purchased an Extended Reporting Period of 24 months, which Optional Extended Reporting Period shall commence at 12:01 a.m. on May 1, 2023 and expire at 12:01 a.m. on May 1, 2025. Such Optional Extended Reporting Period applies only to Claims that are first made against the Insured during the Optional Extended Reporting Period by reason of an act or omission that occurred prior to the end of the Policy Period which is otherwise covered by this Policy.

Insured Caraway & Broombaugh, P.C.	Policy Number PLP-1499184-P7	
Effective Date of This Endorsement 05/01/2023	Authorized Representative	

Berkley Insurance Company

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Amend the Declarations

It is understood and agreed that the previously issued endorsement no. LPL 900101 is hereby declared null and void and replaced by the following:

In consideration of the premium paid for this Policy, it is understood and agreed that effective May 01, 2023, the Declarations page of this Policy is amended as follows:

1. Item 2 and 7 of the Declarations is amended to read as follows:

Item 2 and 7.

Item 2. Policy Period: From June 01, 2022 (inception date) to May 01, 2023 (expiration date)

Item 7. Premium:

, ,		
Insured	Policy Number	
Caraway & Broombaugh, P.C.	PLP-1499184-P7	
Effective Date of This Endorsement	Authorized Representative	
05/01/2023		